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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Other Th	an An Autho	rized Commi	ttee		Office U	se Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN	π ▼	Example: If ty over the lines.		12FE	M5	
, WOMEN SPEAK OUT	Г РАС						
ADDRESS (number and street)	2800 Shirling	ton Rd					
▼ Observed of differenced	Suite 1200				1 1 1		1
Check if different than previously reported. (ACC)	Arlington				VA	22206	3
2. FEC IDENTIFICATION N	IUMBER ▼	CITY	<b>A</b>		STATE A		ZIP CODE ▲
C C00530766		3. IS T REP	HIS PORT	NEW (N) <b>OR</b>		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20	(M2)	May 20 (M5)		Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20		Jun 20 (M6)		Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (	Q1)	Apr 20		Jul 20 (M7)		Oct 20 (M10)	
July 15 Quarterly Report (	Q2) (C) 12- PR	Day E-Election	Primary (1		=	ral (12G)	Runoff (12R)
October 15 Quarterly Report (		port for the:	Convention	1 (120)	Spec	ial (12S)	
January 31 Year-End Report (	YE)	Election of	on	/ D D /	Y Y Y	Y	in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	on PO	Day ST-Election port for the:	General (3	80G)	Runo	ff (30R)	Special (30S)
Termination Repor (TER)	t	Election o	on	/ D = D /	Y	Y	in the State of
	2 01	2021	through	12	31	20	21
I certify that I have examined t			/ knowledge and	d belief it is to	rue, correct	and comple	te.
Type or Print Name of Treasur	Gross, Jennii er	ei, , ,					
Signature of Treasurer	oss, Jennifer, , ,		[Electronic	ally Filed]	Date 0		
NOTE: Submission of false, error	neous, or incompl	ete information m	nay subject the p	erson signing	this Report	to the penalti	es of 52 U.S.C. § 3010
Office Use							FORM 3X Rev. 05/2016

### **SUMMARY PAGE**

ı	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	<b>I</b> Page <b>2</b>
Wr	rite or Type Committee Name		. ago <b>_</b>
	VOMEN SPEAK OUT PAC		
Re	eport Covering the Period: From:	12	To: 12 / 31 / 2021
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2021		72764.90
	(b) Cash on Hand at Beginning of Reporting Period	542009.46	
	(c) Total Receipts (from Line 19)	11019.05	825971.44
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	553028.51	898736.34
7.	Total Disbursements (from Line 31)	6893.39	352601.22
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	546135.12	546135.12
	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	176881.18	
	This committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### WOMEN SPEAK OUT PAC

		To: 12 31 2021
I. Receipts	COLUMN A	COLUMN B Calendar Year-to-Date
<u> </u>	Total This Period	Calendar fear-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	10615.00	311328.12
(1) 1101111200 (000 001100010 71)	45 1 45 1 45 1	
(ii) Unitemized	404.00	41341.23
(iii) TOTAL (add		7 7 7 7
Lines 11(a)(i) and (ii)▶	11019.00	352669.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	425000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		777000 05
Totals to Line 33, page 5)	11019.00	777669.35
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
All Loans Received	0.00	0.00
ľ		000
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	40200.04
(Carry Totals to Line 37, page 5)	0.00	48302.04
Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.05	0.05
Transfers from Non-Federal and Levin Funds	0.03	0.03
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(	4 4	4 4
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii i dilas (iloiti Scheddle 113)		4 4
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(e) Total Transfer (and To(a) and To(e))	4 4	
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	11019.05	825971.44
, , , , , , , , , , , , , , , , , , , ,	4 4 11 11 11 11 11 11 11 11 11 11 11 11	4 4
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	11019.05	825971.44

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
1. Operating Ex	rpenditures: — d Federal/Non-Federal		Jaionaa Toar to Date		
Activity	(from Schedule H4)	0.00	222		
(i) Fed	deral Share	0.00	0.00		
(ii) Nor	n-Federal Share	0.00	0.00		
	ederal Operating				
	tures	6893.39	330993.18		
	perating Expenditures (a)(i), (a)(ii), and (b))▶	6893.39	330993.18		
	Affiliated/Other Party	4 4			
		0.00	0.00		
Federal Can	didates/Committees olitical Committees	0.00	0.00		
I. Independent		0.00	40000 75		
<ol> <li>Coordinated (52 U.S.C. §</li> </ol>	le E) Party Expenditures 30116(d))	0.00	16626.75		
(use Schedu	le F)	0.00	0.00		
3. Loan Repayı	ments Made	0.00	0.00		
<ol><li>Refunds of 0</li></ol>	Contributions To:	0.00	0.00		
	als/Persons Other  olitical Committees	0.00	430.00		
` '	Party Committees	0.00	0.00		
(such as	olitical Committees s PACs)	0.00	0.00		
` '	ontribution Refunds nes 28(a), (b), and (c))	0.00	430.00		
Othor Dichur	reements (Including		7 7 7		
	Donations)	0.00	4551.29		
). Federal Elec	tion Activity (52 U.S.C. § 30101(20))				
, ,	d Federal Election Activity				
	chedule H6) ral Share	0.00	222		
(i) i ede	Tai Griaie	0.00	0.00		
` '	in" Share	0.00	0.00		
	Election Activity Paid With Fodoral Funds				
-	With Federal Fundsderal Election Activity (add	0.00	0.00		
` '	O(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
. Total Disburs	sements (add Lines 21(c), 22,				
23, 24, 25, 2	26, 27, 28(d), 29 and 30(c))	6893.39	352601.22		
	Disbursements				
	e 21(a)(ii) and Line 30(a)(ii)	2222.22			
HOIH LINE 31	<i>)</i>	6893.39	352601.22		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 11019.00 777669.35 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 430.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 777239.35 11019.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 6893.39 330993.18 (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures 48302.04 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 6893.39 282691.14 (subtract Line 37 from Line 36) ......

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

F	OR	LINE	NU	MBER	:	PAGE	6	OF	19
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

	Statements may not be sold or used by any per he name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle I Beyer, Karen, , ,  Mailing Address P.O. Box 636  City Paoli  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Retired  Receipt For:  Primary General Other (specify)	State Zip Code 19301-0636  C  Occupation (for Individual) Retired  Aggregate Year-to-Date   500.00	Date of Receipt  12
Full Name of Individual (Last, First, Middle In Borchert, Steven, , , Mailing Address 1706 Whitby Avenue  City Portage  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Retired  Receipt For:  Primary General Other (specify)   Call the bound of the step of the s	State Zip Code 49024-2552  C  Occupation (for Individual) Retired  Aggregate Year-to-Date   375.00	Date of Receipt  12 01 2021  Transaction ID: SA11AI.42667  Amount of Each Receipt this Period  25.00  Memo Item
Full Name of Individual (Last, First, Middle I Conger, Bryant, , ,  Mailing Address 18215 SE 23rd Street  City Vancouver  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify)	State Zip Code 98683-1848  C  Occupation (for Individual) Development  Aggregate Year-to-Date   1000.00	Date of Receipt  12 29 2021  Transaction ID: SA11AI.42668  Amount of Each Receipt this Period  1000.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	······	1525.00
TOTAL This Period (last page this line number	er only)	

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

F	OR	LINE	NU	MBER	:	PAGE	7	OF	19
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

	Statements may not be sold or used by any pole name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle I Cox, Audrey, , ,  Mailing Address 14307 Shadow Oaks Lane  City San Antonio  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Homemaker  Receipt For:  Primary General Other (specify)   Other (specify)	Initial) or Full Organization Name  State Zip Code 78231-1639  C  Occupation (for Individual) Homemaker  Aggregate Year-to-Date ▼	Date of Receipt  12 20 2021  Transaction ID: SA11AI.42669  Amount of Each Receipt this Period  6000.00  Memo Item
Full Name of Individual (Last, First, Middle I Dobrzenski, Frank, , , Mailing Address 5304 Sapphire Springs Drive City Knightdale  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)		Date of Receipt  12 01 2021  Transaction ID : SA11AI.42671  Amount of Each Receipt this Period  150.00  Memo Item
Expedient Resource Services  Receipt For:  Primary General  Other (specify) ▼	Principal  Aggregate Year-to-Date ▼  1800.00	
Full Name of Individual (Last, First, Middle I Endres, Stephen, , ,  Mailing Address 105 Charmuth Road  City Lutherville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Emory Hill Receipt For: Primary General Other (specify)	Initial) or Full Organization Name  State Zip Code 21093-5209  C  Occupation (for Individual) CFO  Aggregate Year-to-Date ▼  455.00	Date of Receipt  12 08 2021  Transaction ID: SA11AI.42672  Amount of Each Receipt this Period  35.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		6185.00
TOTAL This Period (last page this line number	er only)	

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

F	ЭR	LINE	NU	MBER	:	PAGE	8	OF	19
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	×	11a		11b		11c	12	2	
		13		14		15	16	6	17

	y information copied from such Reports and State for commercial purposes, other than using the n			
$\rangle$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Hegeman, Carmen, B., , Mailing Address 809 La Cruz Drive	l) or Full Or	ganization Name	Date of Receipt
	City	State	Zip Code	12 10 2021 Transaction ID : SA11AI.42678
	El Paso	TX	79902-1720	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual) Self Employed	Occu Attor	pation (for Individual) ney	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 1200.00	
В.	Full Name of Individual (Last, First, Middle Initia Kemp, Cindi, , , Mailing Address 207 West Main Street	l) or Full Or	ganization Name	Date of Receipt
	City Newbern	State TN	Zip Code 38059-1518	Transaction ID : SA11AI.42681  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Retired	Occu Retir	pation (for Individual) ed	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 500.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initia Koon, Edward, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 4381 Leonard Street			12 16 2021
	City Coopersville	State MI	Zip Code 49404-9610	Transaction ID : SA11AI.42682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		35.00
	Name of Employer (for Individual) Universal Appraisers	Occu Appra	pation (for Individual) aiser	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate \	/ear-to-Date ▼ 420.00	
s	UBTOTAL of Receipts This Page (optional)			635.00
Т	OTAL This Period (last page this line number on	ly)		

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

F	OR	LINE	NU	MBER	:	PAGE	9	OF	19
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	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

		to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle Lineberger III, Adrian, , ,  Mailing Address 10217 Mahonia St Unit 204		Date of Receipt
	<del>,</del>	12 28 2021
City	State Zip Code	Transaction ID : SA11AI.42686
Charlotte	NC 28277-3912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Carolinas Center for Oral & F	Director Anesthesia	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
Full Name of Individual (Last, First, Middle Linn, James, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 3575 North Morris Bouleva	rd	12 29 2021
City	State Zip Code	Transaction ID : SA11AI.42688
Milwaukee	WI 53211-2213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) Ascension	Occupation (for Individual) Doctor	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1000.00	
Full Name of Individual (Last, First, Middle Mehl, David, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 7598 N. Secret Canyon Dr	ive	12 03 2021
City	State Zip Code	Transaction ID : SA11AI.42693
Tucson	AZ 85718-1449	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) Cottonwood Properties	Occupation (for Individual) President	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	1000.00	
Other (specify)		
Other (specify)  SUBTOTAL of Receipts This Page (optional)		2020.00

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:					PAGE	_ ′	10	OF	19
(che	(check only one)								
X	11a		11b		11c		12		
	13		14		15		16		17

	y information copied from such Reports and Stat for commercial purposes, other than using the n			
$\rangle$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			
Α.	Full Name of Individual (Last, First, Middle Initial Minks, Rachel, , ,  Mailing Address 17024 Barium Street Northwest	) or Full C	Organization Name	Date of Receipt
	Mailing Address 17024 Bandin Street Northwest		12 15 2021	
	City	State	Zip Code	Transaction ID : SA11AI.42694
	Andover	MN	55304-1623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Capstone Homes	Dire	ector of Community & Culture	_
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3300.00	
В.	Full Name of Individual (Last, First, Middle Initial  Mailing Address	) or Full C	Organization Name	Date of Receipt
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
С.	Full Name of Individual (Last, First, Middle Initial	) or Full C	Organization Name	Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)			250.00
т	OTAL This Period (last page this line number on	ly)		10615.00

#### S П

Use separate schedule(s)   Use separate schedule(s)   Use	S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 11 OF 19							19			
Detailed Surmary Page   28   28   28   20   30   30	IT	EMIZED DISBURSEMENTS		Use separate schedule(s) (ch										
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Fall)  WOMEN SPEAK OUT PAC  Full Name (Last, First, Middle Initiat)  A. Anedod, Inc  Mailing Address 1940 Poydras Street Suite 1770  City One Category/ Oritic Sought  For president State: District  Full Name (Last, First, Middle Initiat)  Office Sought  For president State: District  Full Name (Last, First, Middle Initiat)  B. Denton US LLP  Mailing Address 1900 K Street NW  City Washington  Office Sought  For president State: District  Full Name (Last, First, Middle Initiat)  Date of Disbursement  12														
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Fall)  WOMEN SPEAK OUT PAC  Full Name (Last, First, Middle Initiat)  A. Anedod, Inc  Mailing Address 1940 Poydras Street Suite 1770  City One Category/ Oritic Sought  For president State: District  Full Name (Last, First, Middle Initiat)  Office Sought  For president State: District  Full Name (Last, First, Middle Initiat)  B. Denton US LLP  Mailing Address 1900 K Street NW  City Washington  Office Sought  For president State: District  Full Name (Last, First, Middle Initiat)  Date of Disbursement  12	Ar	ny information copied from such Reports and Stater	nents may n	ot be sold or us	ed by any p	persor	n for the	purpos	e o	f so	iciting	contrib	outions	
WOMEN SPEAK OUT PAC  Full Name (Last, First, Middle Initial)  A. Anedot, Inc  Mailing Address 1349 Poydras Street Suite 1770 City Senate President Strate: Disbursement For: Senate President Disbursement Legal Fees  Candidate Name  City State: Disbursement City State: Disbursement Legal Fees  Candidate Name  City State: Disbursement Memo Item  Substorial Number  City State: Disbursement M		for commercial purposes, other than using the nan												
A Anedot, Inc    Mailing Address 1340 Poydras Street   Sulto 1770		• • •												
Mailing Address 1340 Poydras Street Suite 1770 City New Orleans Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought:	_													
Mailing Address 1940 Poytras Street Suite 1770 City Washington Purpose of Disbursement Condidate Name  Office Sought:  Full Name (Last, First, Middle Initial) B. Denton US LLP  Mailing Address 1900 K Street NW  City Washington President Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Condidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Condidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Condidate Name  City Washington Purpose of Disbursement Legal Fees Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Condidate Name  City Washington Purpose of Disbursement Legal Fees Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Condidate Name  City Washington Purpose of Disbursement Legal Fees Candidate Name  Disbursement  City Washington Purpose of Disbursement Legal Fees Candidate Name  Disbursement  City Washington Purpose of Disbursement Disbursement Legal Fees Candidate Name  Disbursement  City Washington Purpose of Disbursement Disbursement Disbursement  Condidate Name  Disbursement  Condidate Name  Disbursement Disbursement Disbursement  Condidate Name  Disbursement Disbur	Α.	Anedot, Inc												
New Orleans Purpose of Disbursement Credit Card Processing Fees Candidate Name  Category/ Type  Office Sought: House Primary General President District:  Full Name (Last, First, Middle Initial)  B. Denton US LLP  Mailing Address 1900 K Street NW  City Washington Office Sought: House Disbursement For: Senate Primary General Office Sought: Fell dentification Number  Category/ Type  FEC Identification Number  Category/ Type  Transaction ID: SB21B.42703 Amount of Each Disbursement this Period  Transaction ID: SB21B.42703 Amount of Each Disbursement this Period  District: Full Name (Last, First, Middle Initial)  C. Denton US LLP  Mailing Address 1900 K Street NW  City Washington Purpose of Disbursement Legal Fees Candidate Name  Category/ Type  Date of Disbursement  Tell Name (Last, First, Middle Initial)  C. Category/ Type  Transaction ID: SB21B.42703 Amount of Each Disbursement  Tell Name (Last, First, Middle Initial)  C. Category/ Type  Transaction ID: SB21B.42703 Amount of Each Disbursement  Transaction ID: SB21B.42704 Amount of Each Disbursement this Period  Transaction ID: SB21B.42704 Amount of Each Disbursement this Period  Memo Item  Substate: District:  Substate: District:  Substate: District: District:  Substate: District:		•					7							
Purpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: House Primary General Disbursement For: Senate President District:  Full Name (Last, Fist, Middle Initial)  B. Denton US LLP  Mailing Address 1900 K Street NW  City Washington Purpose of Disbursement Legal Fees Candidate Name  Office Sought: House Disbursement Legal Fees  Candidate Name Disbursement District:  Full Name (Last, Fist, Middle Initial)  Date of Disbursement Legal Fees  Candidate Name Disbursement District:  Full Name (Last, Fist, Middle Initial)  C. Denton US LLP  Mailing Address 1900 K Street NW  City Washington Purpose of Disbursement Legal Fees  Candidate Name Disbursement District:  Full Name (Last, Fist, Middle Initial)  C. Denton US LLP  Mailing Address 1900 K Street NW  City Washington Purpose of Disbursement Legal Fees  Candidate Name Disbursement District:  Full Name (Last, Fist, Middle Initial)  C. Denton US LLP  Mailing Address 1900 K Street NW  City Washington Purpose of Disbursement Legal Fees  Candidate Name Disbursement District:  FEC Identification Number  Category/ Type  Transaction ID: S8218.4270  Amount of Each Disbursement  Category/ Type  Memo Item  FEC Identification Number  Category/ Type  Transaction ID: S8218.4270  Amount of Each Disbursement  Senate Primary General District:  Senate Primary General District:  SubstortAL of Disbursement This Pended  Memo Item  SubstortAL of Disbursement This Pended  Memo Item		,					FEC Identification Number							
Category/ Candidate Name  Office Sought: House   Disbursement For:   Senate   President   Other (specify)   ▼  State: District:   Full Name (Lest, First, Middle Initial)  B. Denton US LLP  Mailing Address 1900 K Street NW  City   Mashington   Disbursement For:   Disbursement   Disbursement			LA	70112		-	C			Т	-		1	
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State: District: Full Name (Last, First, Middle Initial)  B. Denton US LLP  Mailing Address 1900 K Street NW  City			,								7			
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SCHEDULE B (FEC Form 3X)	Har -	parato cabadula (1)	FOR LINE NUMBER: PAGE 12 OF 19							
ITEMIZED DISBURSEMENTS	for each	parate schedule(s) category of the	I '	(check only one)  x 21b 22 23 26						
	Detailed	Summary Page	28		28c	29	27 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may	not be sold or use	ed by any pe	rson for the p	urpose o	f soliciting	contributio	ns		
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Mailing Address P.O. Box 37046				12	20		2021			
City	State MD	Zip Code		FEC Ide	ntification	Number				
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### SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 13 OF 19

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X				
IAME OF COMMITTEE (IN Full) WOMEN SPEAK OUT PAC		Transaction ID : SC/10.9700				
LOAN SOURCE Full Name (Last, First, M Susan B Anthony List, Inc.	iddle Initial)	N				
Mailing Address 2800 Shirlington Rd		Other (specify) ▼				
Ste 1200						
City	State	ZIP Code				
Arlington	VA	22206				
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period				
77452.55	-	0.00 77452.55				
TERMS  Date Incurred	D	te Due Interest Rate Secured:				
M 11 M / B 30 B / Y 2017	M = M / D = D	/ 11/30/2021 0.00 % (apr) Yes ✗ No				
List All Endorsers or Guarantors (if any)	to Loan Source					
Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
SUBTOTALS This Period This Page (optional)						
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.						

### SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 14 OF 19

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.13439 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2800 Shirlington Rd Other (specify) ▼ Ste 1200 State City ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10118.58 10118.58 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2018 11/30/2022 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 10118.58 TOTALS This Period (last page in this line only)..... 87571.13 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

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19

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Denton US LLP Mailing Address 1900 K Street NW State Zip Code Washington DC 20006 Transaction ID: SD10.39259 Outstanding Balance Beginning This Period 33139.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 6250.00 26889.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Estimate digital ads Media Bridge Mailing Address 11300 Astarita Ave City State Zip Code Partlow 22534 Outstanding Balance Beginning This Period Transaction ID: SD10.15740 2000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4157 10500.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 10500.00 39389.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 16 OF
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(check only one)

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Loan for FEC Reporting Services Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 State Zip Code Arlington VΑ 22206 Transaction ID: SD10.4110 Outstanding Balance Beginning This Period 5000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings Expense Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.4318 5204.43 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5204.43 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original transactions put on SBA CC Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.6625 8610.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 8610.00 18814.43 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Expense put on SBA CC Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.6756 Outstanding Balance Beginning This Period 4709.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4709.73 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): To post Thrifty Car Rental Expense put on Susan B Anthony List, Inc. SBA Card Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.9222 1894.83 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1894.83 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Supplies Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.15960 200.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 200.00 6804.56 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Travel Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.15958 Outstanding Balance Beginning This Period 27.90 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 27.90 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Salary / Contractor Pay Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.39334 4324.16 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4324.16 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.41208 4950.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 4950.00 9302.06 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailer Production- Tradewinds See Schedule Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 State Zip Code Arlington VA 22206 Transaction ID: SD10.41901 Outstanding Balance Beginning This Period 15000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period 15000.00 1) SUBTOTALS This Period This Page (optional)..... 89310.05 2) TOTALS This Period (last page this line number only)..... 87571.13 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 176881.18 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶